

FILING BY "EXPRESS MAIL" UNDER 37 CFR 1.10

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Date of Deposit

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IN RE APPLICATION OF
AVRAMIS ET AL.

APPLICATION NO: 10/505,399

FILED: AUGUST 19, 2004

Adjustment date: 10/07/2008 GARIAS
08/29/2008 INTEFSW 00001084 190134 10505399
02 FC:1253 1050.00 CR

FOR: COMBINATIONS OF (A) AN ATP-COMPETITIVE INHIBITOR OF C-
ABL KINASE ACTIVITY WITH (B) TWO OR MORE OTHER
ANTINEOPLASTIC AGENTS

Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450

PETITION FOR EXTENSION OF TIME

Sir:

The Office Action of February 1, 2008 has a shortened statutory time set to expire on May 1, 2008. A three-month extension is hereby requested pursuant to 37 CFR §1.136(a).

Please charge Deposit Account No. 19-0134 in the name of Novartis in the amount of \$1050 for payment of the extension fee. An additional copy of this paper is here enclosed. The Commissioner is hereby authorized to charge any additional fees under 37 CFR §1.17 which may be required, or credit any overpayment, to Account No. 19-0134 in the name of Novartis.

Respectfully submitted,




George R. Dohmann
Attorney for Applicants
Reg. No. 33,593
Phone No. (862) 778-7824

Novartis Pharmaceuticals Corp.
Patents Pharma
One Health Plaza, Building 104
East Hanover, NJ 07936-1080

Date: 08-28-08

UNITED STATES PATENT & TRADEMARK OFFICE
Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND					
1 Date of Request: 10/03/08		2 Serial/Patent # 10/505,399			
3 Please refund the following fee(s):		4 PAPER NUMBER	5 DATE FILED	6 AMOUNT	
	Filing			\$	
	Amendment			\$	
X	Extension of Time		08/28/08	\$ 1,050.00	
	Notice of Appeal/Appeal			\$	
	Petition			\$	
	Issue			\$	
	Cert of Correction/Terminal Disc.			\$	
	Maintenance			\$	
	Assignment			\$	
	Other			\$	
			7 TOTAL AMOUNT OF REFUND		\$ 1,050.00
			8 TO BE REFUNDED BY:		
10 REASON:			Treasury Check		
	Overpayment	Credit Deposit A/C #:			
	Duplicate Payment	9 1 9 -- 0 1 3 4			
X	No Fee Due (Explanation):				
Extension of time unnecessary					
11 REFUND REQUESTED BY:					
TYPED/PRINTED NAME: A. Kelley		TITLE: Petitions Examiner			
SIGNATURE:		PHONE: 2-6059			
OFFICE: Office of Petitions					
***** THIS SPACE RESERVED FOR FINANCE USE ONLY: *****					
APPROVED: 		DATE: 10/07/08			

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